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| Effective on 12/09/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <h2 style="text-align: center;">FEE TRANSMITTAL</h2> <h3 style="text-align: center;">For FY 2008</h3> | | Complete if Known Application Number 10/618,762-Conf. #6012 Filing Date July 15, 2003 First Named Inventor Takeharu MURAMATSU Examiner Name D. St. Cyr Art Unit 2876 Attorney Docket No. 1254-0230P | |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | | |
| TOTAL AMOUNT OF PAYMENT | (\$) | 180.00 | |

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| METHOD OF PAYMENT (check all that apply) | |
| <input type="checkbox"/> Check <input checked="" type="checkbox"/> Deposit Account <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): | Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | |
| <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Credit any overpayments |

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| FEE CALCULATION | | | | | | | |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES | | | | | | | |
| | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | |
| | | Small Entity | | Small Entity | | Small Entity | |
| Application Type | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fees Paid (\$) |
| Utility | 310 | 155 | 510 | 255 | 210 | 105 | |
| Design | 210 | 105 | 100 | 50 | 130 | 65 | |
| Plant | 210 | 105 | 310 | 155 | 160 | 80 | |
| Reissue | 310 | 155 | 510 | 255 | 620 | 310 | |
| Provisional | 210 | 105 | 0 | 0 | 0 | 0 | |
| | | | | | | | Small Entity |
| | | | | | | | Fee (\$) |
| | | | | | | | Fee (\$) |
| 2. EXCESS CLAIM FEES | | | | | | | |
| Fee Description | | | | | | | |
| Each claim over 20 (including Reissues) | | | | | | | 50 25 |
| Each independent claim over 3 (including Reissues) | | | | | | | 210 105 |
| Multiple dependent claims | | | | | | | 370 185 |
| Total Claims | | Extra Claims | Fee (\$) | Fee Paid (\$) | Multiple Dependent Claims | | |
| 12 | | -40 = | x | = | Fee (\$) | | Fee Paid (\$) |
| HP = highest number of total claims paid for, if greater than 20. | | | | | | | |
| Indep. Claims | | Extra Claims | Fee (\$) | Fee Paid (\$) | | | |
| 6 | | -9 = | x | = | | | |
| HP = highest number of independent claims paid for, if greater than 3. | | | | | | | |
| 3. APPLICATION SIZE FEE | | | | | | | |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | |
| Total Sheets | | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) | | |
| - 100 = | | /50 = | (round up to a whole number) x | = | | | |
| 4. OTHER FEES(S) | | | | | | | |
| Non-English Specification, \$130 fee (no small entity discount) | | | | | | | |
| Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement 180.00 | | | | | | | |

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| SUBMITTED BY | | | |
| Signature | <i>Robert Downe #48222</i> | Registration No. (Attorney/Agent) | 39,491 |
| Name (Print/Type) | Michael R. Cammarata | Telephone | (703) 205-8000 |
| | | Date | December 5, 2008 |